Office Use Only: Date Received:	Architectural Review No.



## **Architectural Review Application**

Calvert County MD | Department of Planning & Zoning 150 Main Street, Prince Frederick, MD 20678 Phone: (410) 535- 2348 | (410) 535-1600 ext. 2356 TDD: (410) 535-6355 | Fax: (410) 414-3092

Email: PZ@CalvertCountyMD.gov

Name of Project:								
Choose the town center and	l subarea i	in whi	ch the project	is located:				
□ Dunkirk								
□ Owings			Subarea:					
☐ Huntingtown			Subarea:					
☐ Prince Frederick			Subarea:					
☐ St. Leonard			Subarea:					
□ Lusby				Subarea:				
☐ Solomons Subarea:	□ A		□В	□С		)	□E	□F
GENERAL INFORMATION								
Project Address:								
City:			State:		Zip Code:			
Applicant First Name:			Last Name:					
Mailing Address:			Email:					
City:			State:			Zip Code:		
Phone:			Signature:					
Owner First Name:			Last Name:					
Mailing Address:			Phone:					
City:			State:			Zip Code:		
Date:			Electronically Submitted: □					
PROJECT DESCRIPTION: BUILDING								
Building Type:			Roof Pitch:			Building Hei	ght:	
Building: Foundation				□ CI	heck i	if addition	al information	is attached.
Material: Style/Manufacturer		er: Color:						
Building: Exterior Finish				☐ Check if additional information is attached.				is attached.
☐ Siding	Style/Manufacturer:						Color:	
□ Brick	Style/Mai	nufac	turer:				Color:	

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☐ Stucco	Style/Ma	anufacturer:			Color:	
☐ Railings	Style/Ma	anufacturer:			Color:	
□ Columns	Style/Ma	anufacturer:			Color:	
□ Other	Style/Ma	anufacturer:			Color:	
Building: Trim			☐ Check	if addition	al information is attached.	
Material:	Style/Ma	anufacturer:			Color:	
Additional Information:						
Building: Roofing			☐ Check	if additiona	al information is attached.	
Material:	Material: Style/Manufacturer:				Color:	
<b>Building: Windows</b>			☐ Check	if addition	al information is attached.	
Material:	Style/Ma	anufacturer:			Color:	
Material:	Style/Ma	anufacturer:			Color:	
Building: Doors			☐ Check	if additiona	al information is attached.	
Material:	Style/Ma	anufacturer:			Color:	
Material:	Style/Ma	anufacturer:			Color:	
Additional Information:						
Building: Shutters			☐ Check	if additiona	al information is attached.	
Material:	Style/Ma	anufacturer:		Color:		
Building: Decks/Porches			☐ Check	if additiona	al information is attached.	
Material: Dimension				Color:		
Style/Manufacturer:			Description:			
Other:						
Dumpster Enclosure			☐ Check	if additiona	al information is attached.	
Material: Dimensions:				Color:		
Dumpster Enclosure Gate			☐ Check	if additiona	al information is attached.	
Material: Dimensions:			Color:			
Style/Manufacturer:			Description:			
Fence			☐ Check	if additiona	al information is attached.	
Material: Dimensions:			_	Color:		
Style/Manufacturer:			Description:			
Retaining Wall			☐ Check	if addition	al information is attached.	
Material:		Dimensions:		Color:		

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Style/Manufacturer:		Description:			
Outdoor Lighting			if additional information is attached.		
Material:	Style/Manufacture				
Other:		Description:			
Lighting should be dark-sky friendly. An Ordnance Article 6-6 Outdoor Lighting					
PROJECT DESCRIPTION	: SIGN 1	☐ Check	if additional information is attached.		
Type:		Sign Colors:			
Dimensions:		Installed Height:			
Illumination:		Materials:			
Description:					
PROJECT DESCRIPTION	: SIGN 2	☐ Check	if additional information is attached.		
Туре:		Sign Colors:			
Dimensions:		Installed Height:			
Illumination:		Materials:			
Description:					
All signs must meet the regulations for	und in the Calvert C	ounty Zoning Ordina	ance, Article 6-8 Signs.		
REQUIRED ATTACHMEN	TS				
☐ 8.5" x 11" elevations, to scale. Build applicable) windows and door designs railing design, fence design, utility screedimensions and exact wording, lettering	and locations, shut eening and outdoor	ters, corner boards,	, ornamentation and trim, porch/deck		
☐ Building plans		☐ Map showing p	roject location		
□ Site plan					
PRESENTATION MATERI	IALS (for review a	at Committee meetir	ng)		
☐ Samples of materials and colors					
☐ (Optional: For larger projects, presentation boards are recommended.)					
CONTACT INFORMATION	N				
For more information, contact:					
Judy Holt, 410-535-1600 ext. 2501		Jesse Clark, 410-5	35-1600 ext. 8550		
Jenny Plummer-Welker, 410-535-1600	0 ext. 2333				

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CHECKLIST				
Before submitting an application for architectural review requirements in the Town Center Ordinance under the fo	• • •			
☐ Material	☐ Building Mass and Proportion			
□ Color	☐ Roof Pitch			
☐ Lighting	□ Signage			
☐ Doors, Windows, and Decorative Elements	☐ Fencing			
☐ Accessory Structures (sheds, garages, gazebos, etc.)				
SIGNATURE				
I hereby acknowledge that I have read the pertinent chapter or sections of the Town Center Zoning Ordinance, and understand the standards contained therein, as outlined in the checklist supplied above.				
Applicant's Signature:				
Date:	☐ Submitted electronically			